

DEPARTMENT OF HEALTH SERVICES  
COUNTY OF LOS ANGELES

(EMT, PARAMEDIC, MICN)  
REFERENCE NO. 512

SUBJECT: **BURN PATIENT DESTINATION**

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PURPOSE: To ensure the appropriate destination for Los Angeles County patients who sustain burn injuries.

POLICY:

- I. Paramedics should make base contact whenever any patient sustaining burn injuries meets the guidelines established in the Prehospital Care Policy Reference No. 808, Base Hospital Contact and Transport Criteria.
- II. The base hospital should initiate appropriate orders as outlined in the Los Angeles County Treatment Protocols.
- III. Determine the destination of burn-injured patients as follows:
  - A. Patients who meet trauma or Pediatric Medical Center (PMC) criteria and/or guidelines should be transported to the appropriate trauma center or PMC.
  - B. Patients who do not meet trauma or PMC criteria and/or guidelines should be transported to the closest, most accessible medical receiving facility appropriate for their age.
- IV. The receiving hospital should:
  - A. Provide appropriate stabilization of the patient
  - B. Arrange, in conjunction with the Medical Alert Center (MAC), for transfer to an appropriate burn facility if necessary. Provide MAC with the following information:
    1. Status of airway control
    2. Percentage, degree, and location of the burns
    3. Type of burn (electrical, thermal, chemical, radiation)
    4. Level of care the patient requires (ICU, med/surg)
    5. Circulatory status (vital signs and perfusion of burned extremity if applicable)
    6. Level of consciousness

EFFECTIVE: 6-5-79  
REVISED: 2-28-15  
SUPERSEDES: 7-15-11

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APPROVED: \_\_\_\_\_

  
Director, EMS Agency

  
Medical Director, EMS Agency

7. Other injuries
8. Past medical history, pre-existing major systemic disease and current medications
9. Treatment(s) already rendered and in progress

CROSS REFERENCES:

Prehospital Care Manual:

Ref. No. 502, **Patient Destination**

Ref. No. 506, **Trauma Triage**

Ref. No. 510, **Pediatric Patient Destination**

Ref. No. 808, **Base Hospital Contact and Transport Criteria**

Los Angeles County Treatment Protocols